## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

ammuniata All further	correspondence includir ed below or directed oth	or the D	atent advance or	JE FEE and PUBLICATION of means and notification of means and specifying a new corresponding to the property of the property o	aintenance fees woondence address;	rill be n and/or	nailed to the current of (b) indicating a separ	orrespondence address as ate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
HENRICKS SLAVIN AND HOLMES LLP SUITE 200 840 APOLLO STREET EL SEGUNDO, CA 90245					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name)			
								(Date)
APPLICATION NO.	FILING DATE			FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/007,992	0/007,992 11/07/2001			Robert B. Dybdal	700700-017 3329			
TITLE OF INVENTION	I: METHOD OF DETER	MININ	G COMMUNICA	TION LINK QUALITY E				
APPLN, TYPE	SMALL ENTITY	ISS	UE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES		\$720	\$300	\$0		\$1020	04/10/2008
EXAMINER			ART UNIT	UNIT CLASS-SUBCLASS				
SAMS, MATTHEW C 2617				455-067100				
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 Henricks, Slavin  & Holmes LLP  2				
PLEASE NOTE: Ur recordation as set for (A) NAME OF ASSI The Aero	nless an assignee is iden thin 37 CFR 3.11. Com IGNEE Ospace Corpo	tified be pletion	clow, no assignee of this form is NC	THE PATENT (print or type data will appear on the pay of a substitute for filing an amount of the second of the second of the second of the patent):	atent. If an assign assignment.  Yand STATE OR Co., Califor	COUNT cnia	RY)	
4a. The following fee(s)  Lissue Fee  Dublication Fee ( Advance Order -	No small entity discount		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO 2038—is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).					
a. Applicant clair	atus (from status indicatents SMALL ENTITY statents at the sta	tus. See	37 CFR 1.27.	b. Applicant is no lon	ger claiming SMA	LL EN	FITY status, See 37 CI	R 1.27(g)(2).
NOTE: The Issue Fee a interest as shown by the	nd Publication Fee (if received records of the United St	quired) vates Pat	ent and Trademar	ed from anyone other than tk Office.	то аррисані, а гед	,1010104	amornoy or agoin, or in	a assisting of other party in
Authorized Signatur	e /Peter L.		Date Apr 10, 2008					
Typed or printed nar			Registration No. 37, 353					
This collection of informan application. Confide submitting the complet	mation is required by 37 ntiality is governed by 3 ed application form to the street for reducing this had	CFR 1.3 5 U.S.C ne USPT	311. The informat 2. 122 and 37 CFF O. Time will var	ion is required to obtain or R 1.14. This collection is es y depending upon the individual to the Chief Information Office	retain a benefit by timated to take 12 vidual case. Any c	the pub minutes ommen	lic which is to file (and s to complete, including ts on the amount of the mark Office, U.S. Depo	by the USPTO to process) g gathering, preparing, and me you require to complete artment of Commerce. P.O.

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Collineace, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.